Figure 1. Algorithm for investigations and management in PIMS/MIS-C

Fever and inflammation
- Fever ≥ 3 days and unwell or unexplained fever ≥ 5 days

Investigations (See Table 3)
- Screening bloodwork
- If hyperinflammation -> additional bloodwork
- Consider cardiac workup

Management:
- Consider consultation or admission to hospital
- If admitted, option include:
  a) Observation
  b) Treatment
    - IVIG
    - Steroids
    - ASA
- If discharged, close follow-up with reassessment as needed

Kawasaki Disease or
- Fever ≥ 3 days and KD features

Investigations (See Table 3)
- Screening bloodwork
- Additional bloodwork
- KD bloodwork
- Cardiac workup
- MAS/CSS markers

Management:
- Admit to hospital
- Consult rheumatology, cardiology, infectious disease, ICU (if severe)
  - Treatment
    - IVIG
    - Consider upfront steroids if high risk ** or severe KD
    - ASA

Shock or shock-like state

Investigations (See Table 3)
- Screening bloodwork
- Additional bloodwork
- KD bloodwork
- Cardiac workup
- MAS/CSS markers

Management:
- Admit to hospital
- Consult rheumatology, cardiology, infectious disease, ICU (if severe)
  - Treatment
    - IVIG
    - Consider upfront steroids if high risk ** or severe KD
    - ASA
    - +/- anticoagulation